

RECEIVED
U.S. MARSHAL
SOUTHERN DISTRICT OF CALIFORNIA
SOUTHERN DISTRICT OF CALIFORNIA
2008 APR 21 A 11:10

UNITED STATES OF AMERICA,)

Plaintiff)

vs.)

Defendant(s))

CRIMINAL NO. 08mj8276

ORDER

RELEASING MATERIAL WITNESS

Booking No.

On order of the United States District / Magistrate Judge,

IT IS HEREBY ORDERED that the following named person heretofore
committed to the custody of the United States Marshal as a material witness be
released from custody: (Bond Posted / Case Disposed / Order of Court).

Andres Hernandez - Galan

DATED: 4/21/08

JAN M. ADLER

UNITED STATES DISTRICT/MAGISTRATE JUDGE

RECEIVED

DUSM

OR

W. SAMUEL HAMRICK, JR. Clerk

by

Deputy Clerk

BOND FOR A MATERIAL WITNESS

ARR 4/4/08

6549

AUSA Approval: WJK

United States District Court United States of America v. <u>MELVIN ALFARO-ZOMGA</u>	FILED Southern District of California 08 APR 21 AM 10:31 Crim. Case No. <u>08 M; DEPU 8292</u> Magis. Case No. <u>08 M; DEPU 8292</u>
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We, NOE ALVARADO (name of surety) and ANDRES VIZCAINO-GALARZA (name of material witness), post this bond and acknowledge we and our personal representatives are bound to pay the United States of America the sum of \$ 5000 and there has been deposited in the Registry of the Court the sum of \$ 500 in cash. This bond is conditioned upon and posted to secure the appearance of material witness ANDRES VIZCAINO-GALARZA to testify as a witness in the case noted above, before the assigned United States Magistrate Judge or District Judge, in the United States District Court for the Southern District of California, at San Diego, California, and at such other places as the material witness may be required to appear in accordance with any and all court orders and directions given or issued by the Magistrate Judge or any District Judge relating to the material witness' appearance in the case noted above, whether the case remains in that district or is transferred to any other district. The appearance bond further secures the above noted material witness' compliance with any court order, including surrendering to the INS.

If the material witness adheres to and performs every condition of this bond, and appears at court as directed or ordered, this bond shall be exonerated, but if the material witness fails to perform any condition of this bond, or fails to appear at court as directed or ordered, payment of this bond shall be due immediately. Any Magistrate Judge or District Judge authorized to preside over the case noted above may declare a forfeiture of this bond if the material witness breaches any condition of this bond. If the bond is forfeited and the forfeiture is not set aside or remitted, a judgment may be entered upon a motion filed in the United States District Court for the Southern District of California against the surety for the amount stated above, with costs and interest added, and execution of the judgment may be issued or payment secured as provided by the Federal Rules of Criminal Procedure and the other laws of the United States.

Material Witness' Signature: Andres Vizcaino G. Surety's Signature: Noe Alvarado V.
 Surety's Home Address: 105 Blanchard Ave Santa Paula Ca- 93060
 Material Witness' U.S. Address: 1190 SIERRA VISTA, ATWATER, CA 95301

Acknowledgment: The surety noted above signed this bond before me, CHLOE KERNADIZ (print name of person witnessing surety's signature), on 4-11-08 (date), at Chula Vista CA (city/state).
 My address is: 551 3rd Ave CV. CA 91910
 Signature Of Person Witnessing Surety's Signature: [Signature] Dated: 4/11/08

Bond Approved: [Signature], United States Magistrate Judge or District Judge

AFFIDAVIT BY THE OWNER OF THE CASH SECURITY FOR THIS BOND

I, Noe Alvarado (print name of owner of cash), state that I reside at 405 BLANCHARD AVE, SANTA PAULA, CA 93060, and that I am the owner of the \$ 500 cash deposited in the Registry of the Court as security for this bond. That money is to be returned to me at the address noted here upon the exoneration of this bond.

I consent to subjecting those funds to the Local Court Rules of the United States District Court for the Southern District of California pertaining to bonds, and I consent, upon receiving notice of not less than ten days, to proceeding summarily to the rendering of a judgment against that cash security upon the breach of a condition under this bond or by the contumacy of the material witness.

Dated: 04-11-08

Noe Alvarado U.
Signature of the Owner of the Cash Security

FINANCIAL JUSTIFICATION OF THE SURETY

I, Noe Alvarado (print name of surety), state under penalty of perjury under the laws of the United States of America, that I have a net worth of at least \$ 5000, and that I reside at 405 Blanchard Ave. Santa Paula Ca. 93060

Dated: 04-11-08

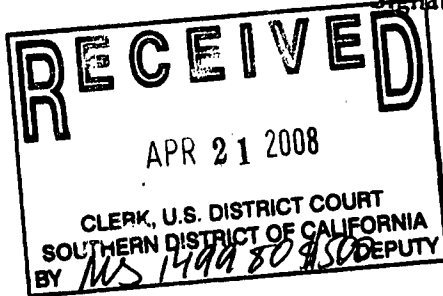
Noe Alvarado U.
Signature of the Surety

SURETY AGREEMENT

I understand by signing this bond I will be responsible for the material witness' appearance in court and for his or her compliance with any and all conditions of the release and orders as directed by the court. If the material witness does not appear in court as ordered or comply with the conditions of the release and any court orders, I will be required to pay the full amount of the bond, and any cash security I posted with the court may be taken by the United States Government to partially satisfy the obligation of this bond, and a judgment may be entered against me for the full amount of the bond.

Dated: 04-11-08

Noe Alvarado U.
Signature of the Surety



CASE INFORMATION

Case Name: U.S. v. ALFARO-ZUMGA

Case No. 08 MJ 8292

AUSA Name: DOUGLA KERRA

AUSA Telephone: 557-6549

Case Agent: _____

Agency: _____

INFORMATION ABOUT THE MATERIAL WITNESS

Name: ANDRES VIZCAINO - GALARZA

A-Number: UNKNOWN

Date of Birth: 12/9/77

Immigration Status: UNDOCUMENTED

Foreign Address: MEXICO

Did The Material Witness Sign An I-826? _____

Relationship to Defendant: _____

PERSON MATERIAL WITNESS WILL RESIDE WITH DURING PENDENCY OF THE CASE

Name: SENOR VIZCAINO - RODRIGUEZ

Relationship to Witness: FATHER

Home Address: 1190 SIERRA VISTA, ST., ATWATER, CA 95301

Business Address: _____

Home Telephone: (209) 358-2586

Business Telephone: _____

RELATIVE OF THE MATERIAL WITNESS RESIDING IN THE U.S.

Name: SAME AS ABOVE

Relationship to Witness: _____

Home Address: _____

Business Address: _____

Home Telephone: _____

Business Telephone: _____

ATTORNEY FOR THE MATERIAL WITNESS

Name: CIRO HERNANDEZ

Tel: (619) 266-0389

Fax: (619) 501-2493

Address: 551 THIRD AVE. CHULA VISTA, CA 91910

INFORMATION ABOUT THE SURETY

Name: NOE ALVARADO

Relationship to Witness: FRIEND

Immigration Status: CITIZEN

Relationship to Defendant: _____

Home Address: 405 BLANCHARD AVE., SANTA PAULA, CA 93060

Business Address: _____

Home Telephone: (805) 933-0804

Business Telephone: _____

Does The Surety Have An Immigration Record (if so, the charges): _____

Does The Surety Have A Criminal Record (if so, the charges): _____

FOR INS USE ONLY

1. MATERIAL WITNESS ☐

SURRENDERED ☐

FAILED TO APPEAR ☐

2. _____

Signature

Date

149 414 3734 6

NOE ALVARADO
405 BLANCHARD AVE
SANTA PAULA CA 93060-1505

and info on back of bill

24-Hour Service and Info:

(800) 427-2200 (English)
(800) 342-4545 (Español)

Sempra Energy Utility

P.O. Box C
Monterey Park, CA 91756
www.socalgas.com

Date Mailed Apr 08, 2008

Rate GRL	Climate Zone 1	Cycle 03	The Gas Company's Gas Commodity Charges per therm \$0.76598/Therm			
Billing Period		Meter	Readings	Difference	Billing	
From	To	Number	Prev	Pres	=CCF	x Factor = Therms
03/06/08	04/04/08	08278215	3653	3694	41	x 1.049 = 43
Next Meter Reading Date on or about: May 05, 2008						

Summary of Charges

CARE Discount Applied

Amount

Customer Charge	29 Days	x 0.13151 = \$	3.81
CARE Baseline	43 Therms	x 0.96186 =	41.36
Gas Charges			45.17
State Regulatory Fee	43 Therms	x 0.00068 =	0.03
CARE Public Purpose Surcharge	43 Therms	x 0.02695 =	1.16
Taxes & Fees on Gas Charges			1.19
Total Gas Charges Including Taxes and Fees			46.36

Last Payment: Mar 31 2008 70.86

Total Current Gas Charges 46.36
Previous Balance 40.28CR

Total Amount Due	6.08
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Current Amount Past Due if not paid by Apr 28, 2008

Our records show this gas meter serves a one-family home. If the type of service or actual number of units is different, call us at the telephone number shown above.

This bill reflects modified gas charges due to a rate change.

Planning to dig in your yard or construction site? Stay safe. Call Underground Service Alert at 8-1-1 at least two business days before you dig.

Energy Comparison	This Year Days	Therms	Daily Average	Last Year Days	Therms	Daily Average
Apr	29	43	1.48	29	34	1.17
Mar	30	33	1.10	30	56	1.87
Feb	32	47	1.47	32	48 E	1.50

Date Mailed
Apr 08, 2008

Please bring entire bill if payment is made in person or return stub with your payment by mail

03 4764 0501
S

Total Amount Due \$6.08 Please Pay By 04/28/08

Save paper & postage: Pay online at www.socalgas.com
--

Make Payment To:

4057.10.332.81678 1 AV 0.312 oz 0.780
NOE ALVARADO

The Gas Company
P O Box C
Mont Pk Ca 91756

405 BLANCHARD AVE
SANTA PAULA CA 93060-1505

Your Account Number
149 414 3734 6



80 1494143734 00000608 66

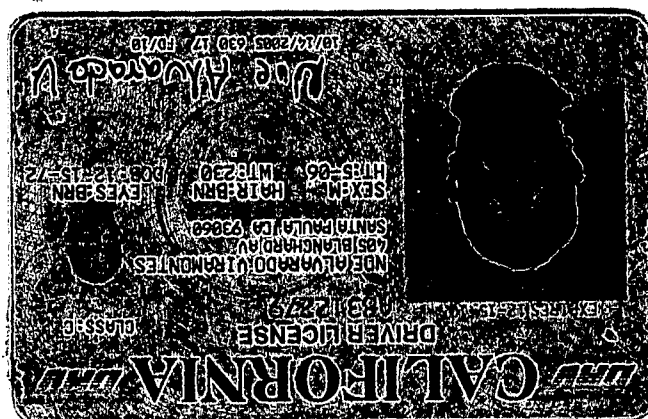
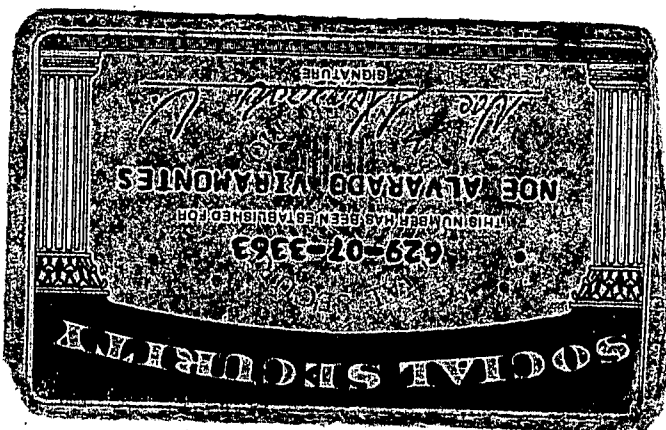
1494143734 0000463663

HOURS		RATE	REGULAR EARNINGS	OVERTIME EARNINGS	UNITS	OTHER PAY		GROSS	PERIOD ENDING
REGULAR	OVERTIME					RATE	AMOUNT		
RECE	WORK						871.00	871.00	03/21/2008
TOTAL GROSS									871.00
DEDUCTIONS									CONTROL NUMBER
F.I.C.A.	FED. W/H	STATE W/H	SDI						922
54.00	78.83	24.35	6.97						TOTAL DEDUCTIONS
MEDICARE	401 K								220.00
12.63	43.55								
EMPLOYEE'S NAME AND SOC. SEC. NO.									NET PAY
41) 3363									650.00
E A VIRAMONTES									

L COAST CONSTRUCTION SPECIALISTS, INC.

152372

HOURS		RATE	REGULAR EARNINGS	OVERTIME EARNINGS	UNITS	OTHER PAY		GROSS	PERIOD ENDING
REGULAR	OVERTIME					RATE	AMOUNT		
RECE	WORK						974.00	974.00	03/14/2008
TOTAL GROSS									974.00
DEDUCTIONS									CONTROL NUMBER
F.I.C.A.	FED. W/H	STATE W/H	SDI						871
60.39	100.54	32.17	7.79						TOTAL DEDUCTIONS
MEDICARE	401 K								263.7
14.12	48.70								
EMPLOYEE'S NAME AND SOC. SEC. NO.									NET PAY
41) 3363									710.20
E A VIRAMONTES									



Department of the Treasury - Internal Revenue Service
Form 1040 U.S. Individual Income Tax Return 2007 size 10pt. Use only one not write or staple in this space.

Label For the year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007, ending 20 Form No. 1040-0074

1 Your first name and initial NOE V Last name ALVARADO Your social security number 629-07-3363

2 If a joint return, spouse's first name and initial MARIA D Last name ALVARADO Spouse's social security number 622-61-4652

3 Home address (number and street). If you have a P.O. box, see page 12. 405 BLANCHARD AVE Apt. no. You must enter your HSN(s) above.

4 City, town or post office, state, and ZIP code. If you have a foreign address, see page 12. SANTA PAULA CA 93061 Checking a box below will not change your tax or refund.

5 Presidential Election Campaign ☐ Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 12) ☐ Yes ☐ No ☐ Spouse

Filing Status **1** Single **2** ☒ Married filing jointly (even if only one had income) **3** Married filing separately. Enter spouse's SSN above and full name here. **4** Head of household (with qualifying person). (see page 12.) If the qualifying person is a child but not your dependent, enter this child's name here. **5** Qualifying widow(er) with dependent child (see page 14)

Exemptions **6a** ☒ Yourself. If someone can claim you as a dependent, do not check box 6a. **6b** ☒ Spouse. **6c** Dependents: **(1)** First name **(2)** Last name **(3)** Dependent's social security number **(4)** Dependent's relationship to you **(5)** Check if qualifying child for child tax credit (line 6c) **(6)** Check if dependent on tax return **(7)** Check if dependent on tax return **(8)** Check if dependent on tax return

(1) First name	(2) Last name	(3) Dependent's social security number	(4) Dependent's relationship to you	(5) Check if qualifying child for child tax credit (line 6c)	(6) Check if dependent on tax return	(7) Check if dependent on tax return	(8) Check if dependent on tax return
DAYRA	BAUTISTA	626-04-1025	DAUGHTER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LYNN	BAUTISTA	614-19-4820	DAUGHTER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

d Total number of exemptions claimed **4**

7 Wages, salaries, tips, etc. Attach Form(s) W-2 **7** 51,956

Income **8a** Taxable interest. Attach Schedule B if required **8a**

8b Tax exempt interest. Do not include on line 8a **8b**

9a Ordinary dividends. Attach Schedule D if required **9a**

9b Qualified dividends (see page 11) **9b**

10 Income refunds, credits, or offsets of state and local income taxes (see page 20) **10** 1,975

11 Alimony received **11**

12 Business income or (loss). Attach Schedule C or C-EZ **12**

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here **13**

14 Other gains or (losses). Attach Form 4797 **14**

15a IRA distributions **15a** **b** Taxable amount (see page 21) **15b**

16a Pensions and annuities **16a** **b** Taxable amount (see page 22) **16b**

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **17**

18 Farm income or (loss). Attach Schedule F **18**

19 Unemployment compensation **19**

20a Social security benefits **20a** **b** Taxable amount (see page 24) **20b**

21 Other income **21**

22 Add the amounts in the far right column for lines 7 through 21. This is your total income **22** 53,931

Adjusted Gross Income **23** Educator expenses (see page 28) **23**

24 Certain business expenses of researchers, performing artists, and top house government officials. Attach Form 2106 or 2106-EZ **24**

25 Health savings account deduction. Attach Form 8889 **25**

26 Moving expenses. Attach Form 3903 **26**

27 One-half of self-employment tax. Attach Schedule SE **27**

28 Self-employed SEP, SIMPLE, and qualified plans **28**

29 Self-employed health insurance deduction (see page 28) **29**

30 Penalty on early withdrawal of savings **30**

31a Alimony paid. b Recipient's SSN **31a** **31b**

32 IRA deduction (see page 27) **32**

33 Student loan interest deduction (see page 30) **33**

34 Tuition and fees deduction. Attach Form 8817 **34**

35 Domestic production activities deduction. Attach Form 8803 **35**

36 Add lines 23 through 31a and 32 through 35 **36**

37 Subtract line 36 from line 22. This is your adjusted gross income **37** 53,931

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 83. **Form 1040 (2007)**